

not enough to catapult us into the high standard of living we would hope for our people.

Only with the goal of cutting our exploding trade deficit and making sure it remains a part of the Presidential race this year will we be able to cure the other part of the twin deficit that is causing the downward pressure on wages and living standards in this country.

INCREASING THE PUBLIC DEBT

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Michigan [Mr. SMITH] is recognized for 5 minutes.

Mr. SMITH of Michigan. Mr. Speaker, I would like to talk about the fact that tomorrow this Chamber is going to increase the borrowing authority to the U.S. Department of Treasury, or we presume the votes will be there to increase the debt.

The public debt of this country is now \$4.9 trillion. I brought a chart with me to explain the roughly \$1.6 trillion budget that this Federal Government spends every year. If we look at the growth of the U.S. budget, back in the 1970's, the U.S. budget used up a much smaller portion of our total gross domestic product.

□ 1615

In fact, in 1948 it represented 12 percent of GDP. Now it is up to 21 percent of GDP. This Government, this overbloated bureaucracy, is growing bigger and bigger, and how are we going to stop the overspending? How are we going to stop more and more borrowing, that means that we are taking the money that our kids and grandkids have not even earned yet to pay for what we consider today's problems?

Everybody in the generation under 40 years old had better sit up and take note about what Government is doing to their future. This pie chart represents how Government spends its money. The bottom blue part represents half of the Federal budget, and it is spent for welfare and so-called entitlement spending.

The little white part represents interest. Interest is now becoming the largest single item in the Federal budget. This year, this represents net interest. Gross interest, if we include the interest that is paid on the money that we borrow from Social Security and the other trust funds, was over \$300 billion this part year, larger than any single expense item in the budget.

The red section represents 12 appropriation bills. Those 12 appropriation bills are controlled by Congress. Article I of the Constitution says Congress is responsible for the purse strings. This is about all we have left, is that little red piece of pie that represents 18 percent of the budget that represents the 12 appropriation bills. Why I say Congress has control of that appropriation spending is because if the Presi-

dent vetoes that particular bill, then there is no money there.

The green part is defense spending, and I have separated that out as the 13th appropriation bill, because the hawks and doves, the conservatives and liberals, almost never have disagreed more than a plus or minus 10-percent deviation. Everybody agrees that there should be a certain amount of our budget spent for national defense, so that is pretty much on automatic pilot.

The blue is on automatic pilot on the welfare programs, because those welfare and entitlement programs, we cannot reduce the spending for those programs unless the President signs the bill to do it.

What we have done is we have given away congressional authority over the years and said that the money is automatically going to be there if individuals meet this certain criteria of entitlement. There is a certain level of poverty, so therefore they are eligible for food stamps, or they are poor and have kids and are eligible for AFDC, or reach a certain age so you can have Medicare, or a certain level of poverty so you can have Medicaid. This cannot be changed. This is the part of the budget that is causing us to increase the national debt more than any other part of the budget.

What a lot of us think is that it is reasonable, Mr. Speaker, to say to the President, look, if we are going to increase this debt over the \$4.9 trillion that we now have, then we want to tie to it some reforms in the welfare programs, the entitlement programs, that are causing the greatest need for increasing that debt.

Let us be fair to our kids, let us be encouraging to the economy, let us balance the budget. The only way you can balance the budget is to change the entitlement programs. That means the President has to sign that bill.

We tried it once. We got a balanced budget through the House and the Senate. The President vetoed it. We are going to try again, Mr. Speaker.

HEALTH CARE REFORM

The SPEAKER pro tempore. Under the Speaker's announced policy of May 12, 1995, the gentleman from New Jersey [Mr. PALLONE] is recognized for 60 minutes as the designee of the minority leader.

Mr. PALLONE. Mr. Speaker, the reason I am here today is because Democrats as a party in the House of Representatives, basically over 170 democratic Members of the House of Representatives, are uniting behind a proposal that would make modest but important improvements in America's health insurance. Basically it would provide access to more Americans so that they can have health insurance, and guaranteeing also that if they lose their job or change jobs, that they can carry their insurance with them.

The bill that we are all uniting behind and cosponsoring is sponsored in

the House of Representatives by the gentlewoman from New Jersey, Mrs. MARGE ROUKEMA, a Republican and a colleague of mine, and her bill is basically the same as the one that is sponsored in the Senate by Senators KASSEBAUM and TED KENNEDY. So this is a bipartisan effort.

Basically, it is a bipartisan effort to try to bring very modest health insurance reform to the American people. I should also point out that in his State of the Union Address, President Clinton said that he would sign this bill if it was passed by the Senate and the House and brought to his desk.

The problem that we face right now is that there are strong indications that the House Republican leadership, Speaker NEWT GINGRICH and the Republican leadership in the House, are not willing to bring the bill to the floor in its existing form, and, in fact, are talking about loading up the legislation with many other provisions which we think we make it more difficult for this bill to pass.

I want to introduce to talk a little bit about the bill, the gentlewoman from California [Ms. ESHOO]. Before I do that though, I just wanted to say very briefly, that, as I said, there are 170 Democrat Members of the House that have signed on as cosponsors to this bill, and there are numerous organizations, most notably the American Medical Association and a list of probably about 100 different health care specialty groups, as well as some insurers, who are not saying that they also support the bill.

In addition to that, there has been a commitment by the Republican leadership in the Senate to bring the bill to the floor the second or third week in April. So, again, the only thing that is holding up action on this legislation at this point is the House Republican leadership, which so far has been unwilling to bring it to the floor.

Mr. Speaker, I would like to introduce my colleague, the gentlewoman from California [Ms. ESHOO], who has been a strong leader on this issue.

Ms. ESHOO. I thank the gentleman from New Jersey [Mr. PALLONE].

Mr. Speaker, I would like to return the compliment with a multiplier, because the gentleman has been at the forefront in support of the changes that need to be made for the American people on health care. He has been an eloquent voice in the committee that we both serve on, the Committee on Commerce, when it has come to Medicare and the protection of the elderly in our Nation. He has spoken not only eloquently but very sensibly. Sometimes I think the most uncommon of the senses is common sense. He does not lack that.

I am delighted to join with my colleague today during this special order to talk about this bill on health insurance. I ran for Congress in 1992, and one of the issues that motivated me the most, because it was something that I concentrated on and gave 10 years of